

REQUEST FOR HAP CONTRACT GREATER THAN 5 YEARS

Project Name: _____

Ownership Name: _____

Section 8 Contract #: _____

I hereby request a project-based Section 8 Housing Assistance Payment renewal contract with a term of _____ years (maximum allowed term is 20 years), and certify to the following (please check boxes):

☐ I commit to preserving this property as affordable, assisted housing for the full term of the contract.

☐ I certify that the owner/agent of the project listed above is not currently in default of any business agreements with HUD.

Comments in support of the request (optional):

Owner's Signature

Owner's Name (print)

Title

Date

MHFA CONCURRENCE

MHFA has reviewed the owner's request for an extended term contract and recommends a renewal date of _____ years.

MHFA Official's Signature

MHFA Official's Name (print)

Title

Date

HUD APPROVALS

The HUD field office has reviewed the owner's request for an extended term contract and approves a term of _____ years.

Signature
Paul Woxland, Director
Minneapolis Multifamily Hub

Date